



**Montana Department of Transportation
Administration Division**

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Do Not Write in this Space

Application For Gasoline/Special Fuel Distributor License

Instructions:

Complete this form .

Application is hereby made for a Gasoline/Special Fuel Distributor License in the state of Montana. This is required to comply with Title 15, Ch. 70, Part 3, MCA.

Name of Applicant (print Last, First, Middle)		Telephone Number#	FAX #	Date of Application
Trade Name			Federal Employer Identification Number	
Mailing Address (Street and Number)	City/Town	State/Country	Zip Code	
Location Address (Street and Number)	City/Town	State/Country	Zip Code	

Has company ever been licensed as a distributor in Montana? If yes, when and under what name?

Check the option that is the company's major endeavor in montana:

☐ Refiner ☐ Importer ☐ Exporter ☐ Gasohol Blender ☐ Wholesaler

If Proprietorship - Provide the Following Information

Date Started	Social Security Number	Full Name	Birthdate
Home Address (Street and Number)	City/Town	State/Country	Zip Code

If a Partnership - Provide the Following Information

Partner Names	Social Security Number	Home Address	Birthdate	% Owned

If a Corporation - Provide the Following Information

Officer Names	Social Security Number	Title	Birthdate	% Owned

State or Country Where Incorporated	Date Incorporated	Corporation Number
Note: On a separate sheet of paper, list the names of stockholders holding 10% or more of the outstanding shares of stock in the corporation.		

List any Affiliates -- Wholly Owned Subsidiaries -- Parent Company, etc. (Name and Location)

By cooperative agreement, the Montana Department of Transportation exchanges fuel tax information with other collecting agencies.
Alternative accessible formats of this document will be provided on request.

Is applicant currently licensed with the Internal Revenue Service to receive fuel EX-TAX? <input type="checkbox"/> Yes <input type="checkbox"/> No If "Yes" provide 637 _____			
Estimated Number of Gallons of fuel imported per month:	Gas: _____	Estimated Number of Gallons of fuel acquired in Montana per month:	Gas: _____
	Diesel: _____		Diesel: _____
	Aviation: _____		Aviation: _____
Estimated Number of Gallons of fuel exported from Montana per month:	Gas: _____	Estimated Number of Gallons of fuel sold in Montana per month:	Gas: _____
	Diesel: _____		Diesel: _____
	Aviation: _____		Aviation: _____

List all your Suppliers of Fuel and their Location	

Is the company currently licensed in any other state(s)? <input type="checkbox"/> Yes <input type="checkbox"/> No If "Yes," List state(s) and license number(s).					
State	License Number	State	License Number	State	License Number
What type of carrier do you plan to use to receive or import fuel into Montana? (Check all that apply.) <input type="checkbox"/> Pipeline <input type="checkbox"/> Tank Car <input type="checkbox"/> Tank Truck Proprietary Equipment <input type="checkbox"/> Tanker <input type="checkbox"/> Tank Truck Common or Contract Carrier					

List all Bulk Plant and Terminal Storage Facilities where Fuel will be Stored				
Location	Bulk Plant or Terminal	Owned or Leased	Operator	Total Tank Capacity

Address where Records will be Maintained			
Address	City/Town	State/Country	Zip Code

Person Responsible for Filing required Monthly Reports		
Name (Last, First, Middle)	Title	Telephone Number ()

** NOTICE **		
<p>A licensed Montana Gasoline/Special Fuel distributor is required to keep and maintain, for a period of three years, a complete record of fuel sold and distributed within Montana. Sec. 15-70-212, Sec. 15-70-345 MCA</p> <p>An applicant may be required to provide additional information, including, but not limited to, copies of federal income tax returns and federal excise tax returns for the past three years for individuals, partnerships, corporations, including the returns of officers and partners. An applicant may be required to provide a current credit report.</p> <p>The Montana Department of Transportation reserves the right to investigate all applicants prior to issuance of a gasoline/special fuel distributor license in Montana. Sec 15-70-202, Sec. 15-70-341 MCA.</p> <p>All applications that do not require additional investigation will be processed within ten (10) working days after they are received.</p> <p>The undersigned applicant hereby authorizes full disclosure of any and all information which the Montana Department of Transportation may request from agencies in other jurisdictions, agencies of the federal government, foreign countries, petroleum suppliers, lending institutions and other entities with which you transact business, and further agrees to hold harmless these providers of information.</p> <p>The undersigned applicant hereby further agrees that the Montana Department of Transportation may share any and all information, obtained in its investigation, contained in this application as well as any information contained in tax reports subsequently filed by the applicant, with agencies in other jurisdictions, agencies of the federal government and foreign countries having regulatory or taxing authority.</p> <p>The undersigned applicant certifies that all information contained in this application is true and accurate. This certification is given with the understanding that it is a crime, under Sec. 15-70-232, Sec. 15-70-366 MCA, to certify the truth of a statement knowing that the statement is not true. Such a crime is punishable by a jail sentence of up to 6 months or a fine of \$1,000 or both.</p>		
Name of Applicant (Printed)	Signature of Applicant X	Date Signed
Official Holding Proper Authority (Print Name and Title)		
Signature of Official X		Date Signed